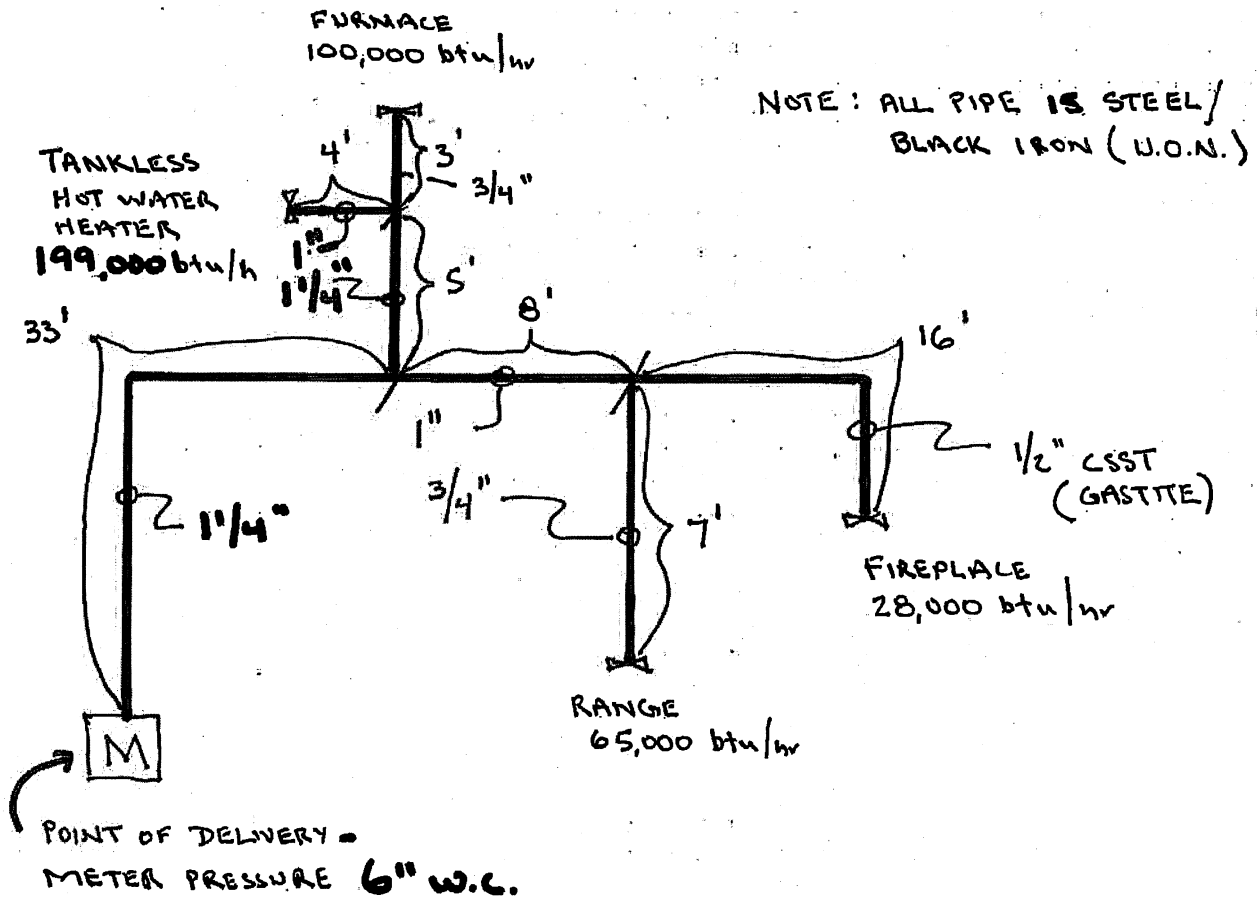


SAMPLE GAS PIPE LINE PLAN



ADDRESS: _____

OWNER: _____

PHONE #: _____

GAS LINE CHECKLIST

ADDRESS:

PIPE SIZE (Indicate on drawing)

PIPE LENGTH (Indicate on drawing)

PIPE TYPE (Indicate on drawing)

GAS TYPE

METER PRESSURE (WATER COLUMN)

GAS LINE LOCATION (CHECK ALL THAT APPLY)

ABOVE GROUND

UNDERGROUND

ROOF TOP

UNIT/APPLIANCE TYPE

INPUT BTU'S

TOTAL BTU'S

GAS PIPE PLAN

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